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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Arent Fox LLP PAC (AFPac) Arent Fox LLP ADDRESS (number and street) 1717 K Street NW (Check if address is changed) Washington 20006 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS norman.lent@arentfox.com (Check if address is changed) Optional Second E-Mail Address nicholas.armstrong@arentfox.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 30 2015 C00241380 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Norman Lent Type or Print Name of Treasurer Norman Lent [Electronically Filed] 01 30 2015 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. FEC FORM 1 (Revised 06/2012)

Office			For further information contact:
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